PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax

(703) 746-4000

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CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

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06/03/2004

MYERS BIGEL SIBLEY & SAJOVEC PO BOX 37428 RALEIGH, NC 27627



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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

(Depositor's name (Signature) (Date

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/735,177	12/12/2000	David McCray Peele	628-318СТ	7421	

TITLE OF INVENTION: TOBACCO PROCESSING

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE		
, nonprovisional	NO .	\$1330	\$300	\$1630	09/03/2004		
EXAM	MINER	ART UNIT	CLASS-SUBCLASS]			
WALLS, I	DIONNE A	1731	131-299000	_			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- $\hfill \Box$ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.
- 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name
- 1 Piper Rudnick LLP 2 Steven B. Kelber

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

will be printed.

☐ Advance

(Authorized Signature)

R.J. REYNOLDS TOBACCO COMPANY

Order - # of Còpies

WINSTON-SALEM, NORTH CAROLINA

Please check the appropriate assignee category or categories (will not be printed on the patent); individual \(\mathbb{\text{\tin}\text{\tetx{\text{\text{\texicl{\text{\texictex{\text{\text{\text{\tetx{\text{\text{\texi}\text{\text{\texi}\text{\texi}\text{\text{\tin}\text{\texitilex{\text{\texi}\text{\texi}\text{\texitilex{\ticr{\tiinter{\texiclex{\texit{\texit{\texi{\texi{\texi{\texi{\tet government 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): XI A check in the amount of the fee(s) is enclosed. XIssue Fee ☐ Payment by credit card. Form PTO-2038 is attached. CXPublication Fee

Xn The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number $\underline{50-1442}$ (enclose an extra copy of this form). to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. Director for Patents is requeste

(Date)

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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retainly benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450

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PIPER RUDNICK LLP

1200 NINETEENTH STREET, NW WASHINGTON, DC 20036-2412 TELEPHONE: 202-861-3900

FACSIMILE: 202-223-2085

DOCKET NO.: 3843-002-27 CONT

ASSISTANT COMMISSIONER FOR PATENTS PO BOX 1450 ALEXANDRIA, VA 22313-1450

Re: Serial No.: 09/735,177

Applicant(s): David MCCRAY PEELE

Filing Date: December 12, 2000 For: TOBACCO PROCESSING

Group Art Unit: 1731

Examiner: Dionne A. Walls

SIR:

Attached hereto for filing are the following papers:

Fee Transmittal
Issue and Publication Fees Transmittal

Our check in the amount of \$1,630.00 is attached covering any required fees. In the event any variance exists between the amount enclosed and the Patent Office charges for filing the above-noted documents, including any fees required under 37 C.F.R. 1.136 for any necessary extension of time to make the filing of the attached documents timely, please charge or credit the difference to Deposit Account No. 50-1442. Further, if these papers are not considered timely filed, then a request is hereby made under 37 C.F.R. 1.136 for the necessary extension of time. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

PIPER RUDNICK LLP

Steven B. Kelber Attorney of Record

Registration No.: 30,073



FEE TRANSMITTAL

 Docket No.
 3843-002-27 CONT

 Serial No.
 09/735,177

 Filing Date
 December 12, 2000

 Inventor(s)
 David MCCRAY PEELE

 Group Art Unit
 1731

 Examiner
 Dionne A. Walls

Registration No.

Registration No.

Date

30,073

Telephone

202-861-3900

										Group Art Onit			Diagra A Walls			
TOTAL AMOUNT OF PAYMENT \$1,630.00								<u>,630</u>	.00	Examiner Dionne A. Walls						
1. 🛭	1. Applicant claims small entity status.									FEE CALCULATION (continued)						
Charge any <u>UNDERPAYMENT</u> or credit any <u>OVERPAYMENT</u> in the indicated fees to Deposit Account No. 50-1442.									3. ADDITIONAL FEES							
□ Charge the indicated fees to Deposit Account No. 50-1442.									Large Entity Small Entity			Entity	Fee Description			
2. ■ Check enclosed.								Fee Code	Fee (\$)	Fee Code	Fee (\$)		Fee Paid			
FEE CALCULATION								1051	130	2051	65	Surcharge-late filing fee or oath				
1. BASIC FILING FEE							1052	50	2052	25	Surcharge-late provisional filing fee or cover sheet					
Large	Entity	Smal	l Enti	ty	Fe	Fee Description					1053	130	1053	130	Non-English Specification	
Fee Code	Fee (\$)	Fee Code		Fee (\$)				Fee Paid		1251	110	2251	55	1-mo. ext. of time		
1001	770	2001		385	Uti	lity filing f	ee				1252	420	2252	210	2-mo. ext. of time	
1002	340	2002		170	Design filing fee						1253	950	2253	475	3-mo. ext. of time	
1003	520	2003		260	Plant filing fee					1254	1480	2254	740	4-mo. ext. of time		
1004	770	2004		385	Reissue filing fee						1255	2010	2255	1005	5-mo. ext. of time	
1005	160	2005		80	Provisional filing fee						1401	330	2401	165	Notice of Appeal	
						SUB	TO	ΓAL (1)		\$0.00	1402	330	2402	165	Appeal Brief	
2. E	XTRA	CLAIM F	EES	;					•		1403	290	2403	145	Request for Oral Hearing	
tot. cla	aims		•	20*	=	0	x	\$18	=	0	1501	1330	2501	665	Utility/Reissue Issue Fee	1330
ind. cl	nd. claims		•	3*	=	0	x	\$86	=	0	1502	480	2502	240	Design Issue Fee	
□ Multiple Dependent Claims \$290 =								=	1504	300	1504	300	Publication Fee	300		
Large Entity Small Entity Fee Description							8001	3	8001	3	Advance Copy of Patent					
Fee Code	Fee (\$)	Fee Code		Fee (\$)							130	1460	130	Petitions to the Commissioner		
1202	18	2202		9	Claims in excess of 20						1806	180	1806	180	IDS Submission	
1201	86	2201		43	Independent claims in excess of 3						8021	40	8021	40	Assignment recordation	
1203	290	2203		145	Multiple dependent claim, if not paid						1801	770	2801	385	For Filing RCE	
1204	84	2204		43	*Reissue independent claims over original patent						1814	110	2814	55	Terminal Disclaimer	
1205	18	2205		9	*Reissue claims in excess of 20 and over original patent						OTHER (indicate below):					
	SUBTOTAL (2) \$0.00															
* or nun	nber previ	iously paid, i	grea	iter; For	Reiss	es see a	bove								SUBTOTAL (3)	\$1,630.00

Name

Name

Signature

Kelber

Steven B